| SCC eFile 2012 ANNUAL REPORT 212539535 COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION                |   |                             |                                       |                                     |  |
|---|---|-----------------------------|---------------------------------------|-------------------------------------|--|
| 1.) CORPORATION NAME:   |   |                             | DUE DATE: 1                           | 1/30/2012                           |  |
| MOTHERS AGAINST DRUNK   | DRIVING                                       |                             |                                       |                                     |  |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATE CREATIONS NETWORK INC 4445 CORPORATION LN 2ND FL |   |                             | SCC ID NO: <b>F0504292</b>            |                                     |  |
|   |   |                             | 5.) STOCK INFORMATION                 |                                     |  |
| VIRGINIA BEACH, VA 23462  |   |                             | CLASS                                 | AUTHORIZED                          |  |
| 3.) CITY OR COUNTY OF VA REG<br>VIRGINIA BEACH CITY   | ISTERED OFFICE:                               |                             |                                       |                                     |  |
| 4.) STATE OR COUNTRY OF INCO  | DRPORATION:                                   |                             |                                       |                                     |  |
| 6.) PRINCIPAL OFFICE ADDRESS  |   |                             |                                       |                                     |  |
| ADDRESS: 511 E J  | OHN CARPENTER FREEWAY                         | Y, STE. 700                 |                                       |                                     |  |
| CITY/ST/ZIP: IRVIN  | G, TX 75062                                   |                             |                                       |                                     |  |
| 7.) DIRECTORS AND PRINCIPAL (   | OFFICERS: All directors a may be desig        | nd principal<br>nated as bo | officers must be<br>th a director and | e listed. An individual an officer. |  |
|   |   | X OFFIC                     | ER                                    | DIRECTOR                            |  |
| NAME:   | JANICE WITHERS                                |                             |                                       |                                     |  |
| TITLE:<br>ADDRESS:  | PRESIDENT<br>511 E JOHN CARPENTER FRV         | VV SHITE 700                | 1                                     |                                     |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                              | VI 3011L 700                | ,                                     |                                     |  |
|   |   | X OFFIC                     | ER                                    | DIRECTOR                            |  |
| NAME:   | BRIAN URSINO                                  |                             |                                       |                                     |  |
| TITLE:  | TREASURER                                     |                             |                                       |                                     |  |
| ADDRESS:<br>CITY/ST/ZIP/CO:   | 511 E. JOHN CARPENTER FRI<br>IRVING, TX 75062 | NY., #700                   |                                       |                                     |  |
| G11 1/G1/211 /GG.   | IRVING, 1A 75002                              | X OFFIC                     |                                       | DIRECTOR                            |  |
| NAME:   | JOHN ANSBACH                                  | X OFFIC                     | EK                                    | DIRECTOR                            |  |
| TITLE:  | GENERAL COUNSEL                               |                             |                                       |                                     |  |
| ADDRESS:  | 511 E. JOHN CARPENTER FR                      | WY., #700                   |                                       |                                     |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                              |                             |                                       |                                     |  |
|   |   | X OFFIC                     | ER                                    | DIRECTOR                            |  |
| NAME:<br>TITLE:   | NICK ELLINGER                                 |                             |                                       |                                     |  |
| ADDRESS:  | ASST SECRETARY 511 E. JOHN CARPENTER FRI      | MV #700                     |                                       |                                     |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                              | WI., #100                   |                                       |                                     |  |
|   |   | X OFFIC                     | ER                                    | DIRECTOR                            |  |
| NAME:   | LISTA HIGHTOWER                               |                             |                                       |                                     |  |
| TITLE:  | CFO   |                             |                                       |                                     |  |
| ADDRESS:<br>CITY/ST/ZIP/CO:   | 511 E JOHN CARPENTER FRV IRVING, TX 75062     | VY #700                     |                                       |                                     |  |
| - · · · · <del>- · · · · · · · · · · · · · ·</del>  |   | χ OFFIC                     | ER                                    | DIRECTOR                            |  |
| NAME:   | VICKI KNOX                                    |                             |                                       |                                     |  |
| TITLE:  | ASST SECRETARY                                |                             |                                       |                                     |  |
| ADDRESS:<br>CITY/ST/ZIP/CO:   | 511 E. JOHN CARPENTER FR                      | NY., #700                   |                                       |                                     |  |
| 011 1/01/LIF/00.  | IRVING. TX 75062                              |                             |                                       |                                     |  |

IRVING, TX 75062

|                   |   | X           | OFFICER  |               | DIRECTOR |
|-------------------|---|-------------|----------|---------------|----------|
| NAME:             | ROBERT STRASSBURGER                         |             | _        |               | 1        |
| TITLE:            | CHAIR                                       |             |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | Y., #7      | 700      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            |             |          |               |          |
|                   |   | Γ.,         | OFFICER  | $\overline{}$ | DIRECTOR |
| NIABAT            |   | Х           | JOFFICER |               | DIRECTOR |
| NAME:             | DEBBIE WEIR                                 |             |          |               |          |
| TITLE:            | CEO   |             |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | Y., #7      | 700      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            |             |          |               |          |
|                   |   |             | OFFICER  | Х             | DIRECTOR |
| NAME:             | STEVE BENVENISTI                            |             |          |               | ]        |
| TITLE:            | DIRECTOR                                    |             |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | <i>/</i> #7 | 700      |               |          |
| CITY/ST/ZIP/CO:   |   | 1.,#1       | 00       |               |          |
| 0111/01/211/00:   | IRVING, TX 75062                            |             |          |               |          |
|                   |   |             | OFFICER  | Х             | DIRECTOR |
| NAME:             | BARBARA BRODT                               |             | _        |               | •        |
| TITLE:            | DIRECTOR                                    |             |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | Y., #7      | 700      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            |             |          |               |          |
|                   |   |             | OFFICER  |               | DIRECTOR |
| NIANAT.           |   |             | JOFFICER | Х             | DIRECTOR |
| NAME:             | BRAD BULLA                                  |             |          |               |          |
| TITLE:            | DIRECTOR                                    |             |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | Y., #7      | 700      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            |             |          |               |          |
|                   |   |             | OFFICER  | Х             | DIRECTOR |
| NAME:             | SALLY GANEM                                 |             |          |               | ]        |
| TITLE:            | DIRECTOR                                    |             |          |               |          |
| ADDRESS:          |   | / 47        | 700      |               |          |
| CITY/ST/ZIP/CO:   | 511 E. JOHN CARPENTER FRWY IRVING, TX 75062 | 1.,#1       | 00       |               |          |
| 011 1/01/211 /00: | IKVING, 1A 75062                            |             |          |               |          |
|                   |   |             | OFFICER  | Х             | DIRECTOR |
| NAME:             | MARY FRANCES KLOTZBACH                      |             | _        |               | •        |
| TITLE:            | DIRECTOR                                    |             |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | Y., #7      | 700      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            |             |          |               |          |
|                   |   |             | OFFICER  | Х             | DIRECTOR |
| NAME:             | EDANIZ C. MADCOUDILOS                       |             | ]        | ^             |          |
| TITLE:            | FRANK G. MARGOURILOS                        |             |          |               |          |
|                   | DIRECTOR                                    | , ,,-       |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | Y.,#/       | 700      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            |             |          |               |          |
|                   |   |             | OFFICER  | Х             | DIRECTOR |
| NAME:             | NICOLE NASON                                |             | _        |               | ]        |
| TITLE:            | DIRECTOR                                    |             |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | √ #7        | 700      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            | , ,, ,,     | 00       |               |          |
|                   | 177 73002                                   | _           | 7        | _             |          |
|                   |   | L           | OFFICER  | Х             | DIRECTOR |
| NAME:             | KATHRYN NELSON                              |             |          |               |          |
| TITLE:            | DIRECTOR                                    |             |          |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | Y., #7      | 700      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            |             |          |               |          |
|                   |   |             | OFFICER  | V             | DIRECTOR |
| NAME:             | COURTNEY DODG                               |             | Johnsen  | Х             |          |
|                   | COURTNEY POPP                               |             |          |               |          |
| TITLE:            | DIRECTOR                                    | ,           | ***      |               |          |
| ADDRESS:          | 511 E. JOHN CARPENTER FRWY                  | Y., #7      | ′00      |               |          |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062                            |             |          |               |          |

|   |                           | OFFICER         | χ DIRECTOR        |  |  |
|---|---------------------------|-----------------|-------------------|--|--|
| NAME:   | PAUL ROMERO               |                 |                   |  |  |
| TITLE:  | DIRECTOR                  |                 |                   |  |  |
| ADDRESS:  | 511 E. JOHN CARPENTER FRV | VY., #700       |                   |  |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062          |                 |                   |  |  |
|   |                           | OFFICER         | X DIRECTOR        |  |  |
| NAME:   | COLLEEN SHEEHEY           |                 |                   |  |  |
| TITLE:  | DIRECTOR                  |                 |                   |  |  |
| ADDRESS:  | 511 E. JOHN CARPENTER FRV | VV #700         |                   |  |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062          | V1., #100       |                   |  |  |
| ,.,.,   | 1777002                   |                 |                   |  |  |
|   |                           | OFFICER         | X DIRECTOR        |  |  |
| NAME:   | MAHESH SHETTY             |                 |                   |  |  |
| TITLE:  | DIRECTOR                  |                 |                   |  |  |
| ADDRESS:  | 511 E. JOHN CARPENTER FRV | VY., #700       |                   |  |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062          |                 |                   |  |  |
|   |                           | OFFICER         | χ DIRECTOR        |  |  |
| NAME:   | BRYCE TEMPLETON           |                 |                   |  |  |
| TITLE:  | DIRECTOR                  |                 |                   |  |  |
| ADDRESS:  | 511 E. JOHN CARPENTER FRV | VY., #700       |                   |  |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062          | ,               |                   |  |  |
|   | <u> </u>                  | OFFICER         | X DIRECTOR        |  |  |
| NAME:   | DDIAN LIDCINO             | OTTIOER         | X DIRECTOR        |  |  |
| TITLE:  | BRIAN URSINO              |                 |                   |  |  |
| ADDRESS:  | DIRECTOR                  | NN/ #700        |                   |  |  |
| CITY/ST/ZIP/CO:   | 511 E. JOHN CARPENTER FRV | VY., #700       |                   |  |  |
| CITT/ST/ZIF/CO.   | IRVING, TX 75062          |                 |                   |  |  |
|   |                           | OFFICER         | χ DIRECTOR        |  |  |
| NAME:   | MONICA VANDEHEI           | <u> </u>        | <u>—</u>          |  |  |
| TITLE:  | DIRECTOR                  |                 |                   |  |  |
| ADDRESS:  | 511 E. JOHN CARPENTER FRV | VY., #700       |                   |  |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062          |                 |                   |  |  |
|   |                           | OFFICER         | X DIRECTOR        |  |  |
| NAME:   | NINA WALKER               |                 |                   |  |  |
| TITLE:  | DIRECTOR                  |                 |                   |  |  |
| ADDRESS:  | 511 E JOHN CARPENTER FRW  | ſΥ              |                   |  |  |
|   | SUITE 700                 |                 |                   |  |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062          |                 |                   |  |  |
|   |                           | OFFICER         | X DIRECTOR        |  |  |
| NAME:   | WILLIAM WINDSOR, JR.      |                 |                   |  |  |
| TITLE:  | DIRECTOR                  |                 |                   |  |  |
| ADDRESS:  | 511 E. JOHN CARPENTER FRV | VV #700         |                   |  |  |
| CITY/ST/ZIP/CO:   | IRVING, TX 75062          | VI., #100       |                   |  |  |
|   |                           | TDONIO DEDODE I | 0.400110.475.4410 |  |  |
| I AFFIRM THAT THE INFORMATIC  |                           |                 |                   |  |  |
|   |                           | I AUTHORIZED TO |                   |  |  |
| /s/ LISTA HIGHTOWER   | LISTA HIGHTOWER, CFO      |                 | 10/15/2012        |  |  |
| SIGNATURE OF DIRECTOR/OFFICE  |                           | PORATE          | DATE              |  |  |
| LISTED IN THIS REPORT   | TITLE                     |                 |                   |  |  |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material |                           |                 |                   |  |  |
| respect with the intent that the document be delivered to the Commission for filing.  |                           |                 |                   |  |  |